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BOSTON REDEVELOPMENT AUTHORITY

MEDICAL INSTITUTION POLICY STATEMENT

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Medical Institution
Policy Statement

Advanced Planning Division
Planning Department

September, 1970

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PREFACE

The following policy statement regarding further medical institution expansion within the City was developed in response to a growing concern on the part of the City over the effects of such expansion on land use patterns and problems of housing, traffic, and city services. It is not the intent of this policy to wholly restrict institutional development, but rather to serve as a guide which will assure that such development is in the best interests of both the immediate neighborhood and the City.

To aid the institutions in preparation of appropriate development schemes, planners from the Boston Redevelopment Authority's Planning Department will be available to review proposed development plans with the institutions. It is hoped that through such meetings continuous communication can be established between the hospitals and medical institutions and the City.

HPCGB

HEALTH PLANNING COUNCIL FOR GREATER BOSTON, INC.
18 OLIVER STREET – SUITE 510 – BOSTON – MASSACHUSETTS – 02110
TEL 617-482-4386

JAMES B. AMES
PRESIDENT
LAURENS MACLURE
VICE PRESIDENT
RHODES G. LOCKWOOD
SECRETARY
JOHN T. G. NICHOLS
TREASURER
JOHN C. DONAHER, JR.
EXECUTIVE DIRECTOR

September 25, 1970

Dear

Mayor White has asked me, as Executive Director of the Health Planning Council for Greater Boston, to send you the enclosed draft of a City policy pertaining to the development of medical institutions. The Mayor has charged this Council with the responsibility for communicating with medical institutions in an effort to promote greater understanding and cooperation between the City and its institutions.

The policy statement prepared by the Mayor's Office attempts to set criteria by which expansion proposals for medical institutions can be evaluated. The draft is not intended as a finished statement. Rather, it is submitted to you for your review and comment as part of our larger effort in cooperating with City institutions in formulating policy.

In order to promote inter-agency coordination and to further the goals of areawide comprehensive health planning, the Mayor has expressed a willingness to provide the technical assistance of Boston Redevelopment Authority to HPCGB and the institutions. As a resource to institutional long range planning committees, therefore, the Council will be capable of channeling its own staff resources as well as those provided by the BRA into areas of assistance and consultation.

An important aspect of the Council's overall philosophy concerns the role of the community in relation to institutional programs. In the role of convenor, the Council assists community groups and institutions in jointly identifying community health problems, determining priorities, and planning health programs which best meet community needs. In this regard, the office of Public Service via their Little City Halls has offered to

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work closely with the Council and with individual institutions in developing working relationships with local neighborhood groups.

Please advise me at your earliest convenience of your comments and reactions concerning the policy statement.

Thank you for your interest and cooperation.

Sincerely,

John C. Donaher, Jr.
Executive Director

JCD/dk

Enclosure

PROPOSED

POLICIES FOR DEVELOPMENT OF MEDICAL INSTITUTIONS IN BOSTON

21 August 1970

The City of Boston is aware of the benefits accruing to the City because of the many medical institutions located within its boundaries. The City is, however, concerned with the nature of institutional growth and the patterns of development. More specifically, it must be concerned with the impact of the institutional development in terms of: the appropriate use of taxable land, the increased demands on city circulation and service systems, the size and character of its housing stock, and the surrounding neighborhoods.

It is with the concern for orderly development and based on the impacts enumerated above, that the City has prepared the following policies regarding institutions in Boston:

I. DEVELOPMENT POLICIES

A. USE OF TAXABLE LAND

1. Conservation of High Tax-Yield Land

Institutional development of tax-exempt uses should avoid property with high actual or potential tax-producing capacity. Development of blighted, vacant or underutilized land, and air rights is encouraged.

2. Intensity of Development

Institutional expansion plans should attempt to minimize erosion of the City's tax base through maximum efficiency in the use of land and facilities. Such efficiencies include: (a) intensive or high-density development of tax-exempt uses in appropriate locations, and (b) joint development of tax-exempt uses with tax-paying uses or with other public or tax-exempt uses wherever possible.

3. Payments in Lieu of Taxes

Regardless of the location, intensity of development, or former tax status of tax-exempt uses, the institution should make payments in lieu of taxes to the City sufficient to support municipal services required by the development.

B. INCREASED DEMAND ON CITY CIRCULATION AND SERVICE SYSTEMS

1. Accessibility

Since medical institutions are generators of traffic, the intensity of development should relate to the

accessibility of public transportation so as to minimize auto traffic. Additionally, consideration must be given to the extent to which the local street system can accommodate the unavoidable automobile and truck traffic which such increased land use produces.

2. Maximum Use of High Accessibility Areas

Since land of high accessibility is at a premium, development and complementary use by two or more institutions is encouraged in locations with good accessibility to public transportation.

3. Off-Street Parking

Although coordination with the public transportation system is encouraged, zoning requirements for off-street parking and truck loading must be satisfied for all development proposals.

4. Impact on Public Services

Acceptability of development proposals will be based on the development's potential impact on public services in the area. These services include police and fire protection, water and sewer facilities, and refuse collection.

C. SIZE AND CHARACTER OF THE CITY'S HOUSING STOCK

1. Encroachment into Residential Areas

Institutional expansion proposals should avoid encroachment into residential areas which are in sound, viable condition.

2. Replacement Housing and Relocation

In any event, the removal, by demolition or conversion, of existing units of housing from the City's private housing supply will be unacceptable unless (a) at least an equal number of new housing units is created by the institution through new construction or conversion at rents comparable to those prevailing in, and in the vicinity of, the removed housing, and (b) adequate provision is made for relocation of the occupants of said removed housing either by the institution itself, or under contract with the Boston Redevelopment Authority.

3. Additions to Housing Stock

Development proposals which include additions to the private housing stock - in excess of any replacement housing required - are encouraged.

4. Provision of Housing for Medical Staff

Development which results in an increase in the housing needs of medical staff should be accompanied by a reasonable increase in housing provided for such staff.

D. IMPACT OF, BENEFITS TO, AND CONSULTATION WITH SURROUNDING NEIGHBORHOODS

1. Accordance with the General Plan

Institutional development should be in conformance with the City's General Plan and with overall community objectives.

2. Adverse Impact on Surrounding Neighborhoods

Institutional development should not have the potential of significant adverse impact on the surrounding neighborhoods.

3. Facilities Beneficial to Neighborhoods

Plans which include programs and facilities having the potential of directly benefiting adjoining residential communities, and which are utilized for such purposes, are encouraged.

4. Community Participation

Through the initiative of the institution itself, any major expansion plan should be developed with the active participation of the residents of the surrounding neighborhoods or their representatives.

II. PROCEDURE REQUIREMENTS

In order to assure the City that an institution's development plans are in conformance with the City's General Plan, community

objectives, and with the orderly development of the institution itself, it will be the responsibility of the institution to discuss proposed development plans with the Planning Department of the Boston Redevelopment Authority and to provide this Department with the material described below. The BRA, as the City's planning agency, is responsible for planning and design review functions over such development proposals.

1. Specific Development Proposals

   Plans for specific development proposals should be submitted to the BRA's Planning Department at an early stage of the development process. The BRA staff will work closely with the institution to determine ways of achieving the institution's development objectives while meeting the criteria set forth in Part I above.

2. General Development Plans

   It will be expected that at the time of submission the institution will be able to relate specific proposals to its long-range development plans or objectives. Such long-range plans should describe long-range space needs for all medical facilities as well as related uses such as offices, housing, parking, and recreation as well as preferences relative to location of proposed development and intensity of site use.

III. IMPLEMENTATION

Development proposals inconsistent with the above policies and which have not been received in accordance with the procedural requirements will be opposed by the Boston Redevelopment Authority acting in its capacity as the City's Planning Agency.

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Medical Institution Policy
Statement.

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